



VIRGINIA POLYTECHNIC INSTITUTE  
AND STATE UNIVERSITY

Virginia Cooperative Extension

*Knowledge for the Commonwealth*



VIRGINIA STATE UNIVERSITY

## 2007 York County Extension – Master Gardener Volunteer Commitment Form

### Contact Information

- ☐ Yes, I will continue my service as a York County Extension Master Gardener.  
(Be sure to flip the sheet over and mark areas you would like to help in during 2007).
- ☐ No, I cannot continue to serve as a York County Extension Master Gardener in 2007.  
I would like to be on Inactive status.
- You will continue to receive “Your Extension Newslines”
  - ☐ Check this box to continue receiving the “Green Thumb” (Snail or E-mail?)
  - You can choose to become active again in future years. This is not permanent.
  - Please keep your mailing address, phone number, and e-mail current with us. If you move out of the area please let us know.

Please review your contact information above. Please make changes/corrections in the proper space below and mail this form back to us in the enclosed envelope. Thank you!

- ☐ My contact information is correct
- ☐ My contact information is not correct, see corrections below

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State: \_\_\_\_\_

Zip Code + 4: \_\_\_\_\_ Home Phone Number: (\_\_\_\_) \_\_\_\_\_  
(will be printed on Roster)

Work Phone Number (\_\_\_\_) \_\_\_\_\_ Cell Phone Number (\_\_\_\_) \_\_\_\_\_  
(will not be published) (will not be published)

E-mail Address: \_\_\_\_\_ @ \_\_\_\_\_  
(Please print very clearly)

**Please complete this side of the form, and then turn the page, and select the program(s) which you would like to volunteer for in the coming year.**

**Please be sure to complete the reverse side of this form.**

**Fold and place in the self addressed, prepaid envelope, and return before November 1, 2006**

[www.ext.vt.edu](http://www.ext.vt.edu)

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## 2007 York County Extension - Master Gardener Volunteer Commitment Form

Your 2007 (January – December) Commitment

**Please complete this side of the form, and then turn the page, and check the mailing label for accuracy. Please return this form by mail before November 1, 2006.**

Please indicate on the table below which programs you would like to help with, and in what capacity. **C** = Coordinate – This means you would like to take a coordinators role with this program. If you are already the coordinator and want to perform this task again in 2006 please indicate that with a “C”. **H** = Help – This means you would like to help or participate in this program. This includes teaching, planning, organizing, making copies, folding, and performing other committee tasks needed to get the job done. “**H only**” means a coordinator has already been assigned/selected for this program area.

4-H Camp H only <input type="checkbox"/>	Lawn Team H <input type="checkbox"/>	Learning Garden Committee & Gardeners <input type="checkbox"/>
4-H Lawns H <input type="checkbox"/>	Plant Health Clinics H <input type="checkbox"/>	Peninsula MG Training Planning Team H only <input type="checkbox"/>
4-H Mums H <input type="checkbox"/>	Horticultural Extravaganza H only <input type="checkbox"/>	Educational Video Production C <input type="checkbox"/> or H <input type="checkbox"/>
4-H School Vegetable Garden C <input type="checkbox"/> or H <input type="checkbox"/>	Landscape Extravaganza H only <input type="checkbox"/>	Arbor Day C <input type="checkbox"/> or H <input type="checkbox"/>
Junior Master Gardener Program H only <input type="checkbox"/>	Horticultural Therapy C <input type="checkbox"/> or H <input type="checkbox"/>	Grant Writer C <input type="checkbox"/> (needed)
Safety Town C <input type="checkbox"/> or H <input type="checkbox"/>	Pruning Team H only <input type="checkbox"/>	Other Request

York County Master Gardeners are very giving and helpful in responding to horticultural questions by phone, some enjoy providing this service while others choose to give their time in other worthy programs. In an effort to help the quarterly phone coordinators, I am asking you to indicate the following:

- ☐ Please call me to respond to horticultural questions by coming into the office to answer phone calls.
- ☐ Please DO NOT call me to answer phone calls in the office. I plan to help in other ways.

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**Thank you for your service to the York County Cooperative Extension Program.**

**Please remember to complete the reverse side of this form.  
Fold and place in the prepaid envelope, and return before November 1, 2006**

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